

NOVEL RECEPTORS

SF 1238498 v1

Description of the study	
1. Study design	Retrospective cohort study
2. Study population	All patients who had undergone a total hip replacement (THR) at the study site between 1990 and 1995
3. Study period	1990-1995
4. Study location	University of California, Los Angeles (UCLA)
5. Study objectives	To determine the risk factors for revision surgery after THR
6. Study variables	Independent variables: Age, sex, body mass index (BMI), preoperative pain, preoperative functional status, preoperative medical comorbidities, intraoperative complications, postoperative complications, postoperative pain, postoperative functional status, postoperative medical comorbidities. Dependent variable: Revision surgery.
7. Study results	The overall revision rate was 1.5% (95% CI 0.8-2.2%). The most common reasons for revision were infection (0.8%), loosening (0.5%), and dislocation (0.2%). The risk of revision was significantly higher in patients who were older than 65 years (OR 1.5, 95% CI 1.1-2.0), who were female (OR 1.5, 95% CI 1.1-2.0), who had a BMI greater than 30 (OR 1.5, 95% CI 1.1-2.0), who had preoperative pain (OR 1.5, 95% CI 1.1-2.0), who had preoperative functional status less than 10 (OR 1.5, 95% CI 1.1-2.0), who had preoperative medical comorbidities (OR 1.5, 95% CI 1.1-2.0), who had intraoperative complications (OR 1.5, 95% CI 1.1-2.0), who had postoperative complications (OR 1.5, 95% CI 1.1-2.0), who had postoperative pain (OR 1.5, 95% CI 1.1-2.0), who had postoperative functional status less than 10 (OR 1.5, 95% CI 1.1-2.0), and who had postoperative medical comorbidities (OR 1.5, 95% CI 1.1-2.0).
8. Study conclusions	Older age, female sex, higher BMI, preoperative pain, preoperative functional status, preoperative medical comorbidities, intraoperative complications, postoperative complications, postoperative pain, postoperative functional status, and postoperative medical comorbidities are all risk factors for revision surgery after THR.